

National Survey of College Counseling 2012

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Sponsor: American College Counseling Association (ACCA)

Publisher: The International Association of Counseling Services, Inc.

Monograph Series Number 9T

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Project Support

This project could not be accomplished without the financial support of the Provost's Office at the University of Pittsburgh, the space provided by the School of Education's Department of Administrative and Policy Studies, and the assistance of the Technical Support Office. Funding has also been generously provided by the American College Counseling Association. ACCA actively promotes ethical professional counselor practice and training in higher education settings. ACCA also offers opportunities for advocacy and leadership, provides continuing education, facilitates communication within the profession, funds and disseminates research, and publicity recognizes meritorious contributions to the profession.

ACCA Website: www.collegecounseling.org

The publisher of this monograph is the International Association of Counseling Services (IACS). As the accrediting agency for counseling centers in a wide variety of settings, the primary objective for IACS is the maintenance of quality service delivery. The basic purposes of the Association are to encourage and aid counseling centers and agencies to meet high professional standards, to inform the public about those that are competent and reliable, and to foster communication among the centers and agencies.

IACS Website: www.iacinc.org

Overview

The National Survey of College Counseling (previously The National Survey of Counseling Center Directors) has been conducted since 1981 and includes data provided by the administrative heads of college and university counseling centers in the United States and Canada. The survey attempts to stay abreast of current trends in counseling centers and to provide counseling center directors with ready access to the opinions and solutions of colleagues to problems and challenges in the field. The areas addressed cover a range of concerns including budget trends, current concerns, innovative programming, and a number of other administrative, ethical and clinical issues.

2012 Survey Highlights (N=293)

More complete data by institutional size are provided with the survey data.

1. 59 % of directors and 69% of staff in the survey are women. In 1982, only 19% of directors were women. This trend toward more women in the field seems to have leveled off and the numbers have stayed approximately the same over the past four years (Item 1).
2. The 293 centers surveyed represent 2.7 million students who are eligible for counseling services at their institutions. 278,000 of these students (10.4 %) sought counseling during the year for individual or group counseling. If these numbers are representative of the 2,400 four-year colleges and universities in the U.S. It suggests that approximately 2.2 million students across the country sought professional counseling assistance during the past year. In addition, 30% (810,000) of the students from the surveyed schools were seen in other contexts by counseling center staff (workshops, orientations, presentations, etc. (Item 2).
3. The ratio of counselors to clients, on average, was 1 to 1,600 students with smaller schools having much better ratios (Item 2b).
4. 29% of centers tend to place limits on the number of client counseling sessions allowed. 48% do not have a session limit policy but promote their centers as a short-term service and rely on counselors to make responsible judgments about how long a student can be seen. 23% tend to see students as long as necessary to resolve the presenting problems but will make external referrals when clinically advisable. The average number of sessions per student across all categories is 6.2 (Item 4).
5. 57% of the surveyed directors have access to on-campus psychiatric consultation, and 23.6 psychiatric consultations per campus (2.7 per 1,000 students) are available (Items 5-6).
6. When asked, if a student is taking medication prescribed by an on-campus psychiatrist, is it necessary for that student to also be in therapy, 44% of the respondents said yes with a therapist in their counseling center, 15% said yes either on or off campus, and 41% said no, only regular med checks are necessary. This raises the question of what do centers that require therapy do when a student is stabilized on medication and no longer desires or has an apparent need for therapy. It raises other questions also about how long the student can be seen in a brief therapy environment (Item 7).
7. At the vast majority of centers the primary role of an on-campus psychiatrist is to conduct psychiatric assessments, prescribe medication, and to provide individual case consultation with other professional staff. 60% also provide consultation at case conference meetings, 35% make

presentations at staff meetings, 7% provide psychotherapy, and 4% supervise interns (Item 8).

8. 87% of directors believe that there has been a steady increase in the number of students arriving on campus that are already on psychiatric medication.
14% of center clients are referred for psychiatric evaluation and 24.4% are on psychiatric medication. The latter is up from 20% in 2003, 17% in 2000, and 9% in 1994 (Items 9-11).
9. 88% of directors report that the recent trend toward greater number of students with severe psychological problems continues to be true on their campuses. In addition, over the past five years, the following percentage of directors has noted increases in the following problems (Items 12-13).
 - 73% Crises requiring immediate response
 - 67% Psychiatric medication issues
 - 59% Learning disabilities
 - 48% Illicit drug use (Other than alcohol)
 - 40% Self-injury issues (e.g. Cutting to relieve anxiety)
 - 36% Alcohol abuse
 - 30% Problems related to earlier sexual abuse
 - 32% Sexual assault concerns (On campus)
 - 26% Eating disorders
 - 22% Career Planning issues
10. Directors report that 39% of their clients have severe psychological problems. 6% of these have impairment, so serious, that they cannot remain in school or can only do so with extensive psychological/psychiatric help, while 33% experience severe problems but can be treated successfully with available treatment modalities (Item 14).
11. Item 15 provides information on what centers are doing to address the increase of students with serious psychological problems.
 - 71% served on interdisciplinary committees aimed at the early identification of troubled students.
 - 67% increased the amount of time in training faculty and others to respond helpfully to students in trouble and to make appropriate referrals.
 - 60% skills training for clients to help them learn to tolerate and manage mild to moderate emotional discomfort without medication.
 - 59% expanded external referral networks.
 - 58% worked with faculty and others who work with students to normalize emotional distress.
 - 56% increased training for staff in working with difficult cases.
 - 47% provide depression screening days for students.

- 45% encouraged student organizations and others who work with students to help these students develop better coping and resiliency skills.
 - 33 % increased psychiatric consultation hours.
 - 24% provided more mandated suicide assessments.
 - 23% increased training for staff in time-limited therapy.
 - Other actions taken include more off-campus referrals, expanded crisis services, and providing campus suicide prevention gatekeeper training.
12. 90% of centers hospitalized an average of 8.5 students per school (2,000 students in all) for psychological reasons. This is more than triple the percentage of students hospitalized in 1994. The average number of hospitalizations per 1,000 students was 1.5 (Items 16-18).
13. Counselors with no other major responsibilities (such as training director) spend approximately 24 hrs. per week providing one-on-one counseling, six hours in other direct services to students (groups, workshops, presentations etc.) and 10 hours in other activities (clinical notes, staff meetings, supervision, contact with faculty parents and others) (Item 19).
14. 92% of the respondents report that the number of students seeking help at their centers has been increasing in recent years (Item 20).
15. 88% of directors state that the increased demand for services, along with the increase in clients with more serious psychological problems, has posed staffing problems for them (Item 21).
16. Directors have attempted to respond to the combined problems in the following ways.
- 73% Non-critical clients are seen less frequently.
 - 66% Staff increase case load at busy times and reduce other involvements.
 - 50% Make use of more external referrals.
 - 46% Staff expected to manage case load so no wait-list develops.
 - 46% Put more focus on brief therapy models
 - 42% No automatic weekly appointments. Students seen as schedule permits.
 - 41% Hired new counseling staff.
 - 37% Established an urgent care triage system.
 - 33% Add part-time staff during busy times.
 - 21% Assigned more students to groups directly from intake.
 - 14% Extended evening hours.
 - 9% Use a telephone assessment/intake system.
17. Directors reported 106 student suicides in the past year (Items 23-39).
- 21% of these were current or former center clients.
 - 77% were males, and 84% were undergraduates.
 - 37% of the suicides occurred on or near campus.

- 74% were Caucasian, 12% were Asian or Pacific-Islanders, 7% were multi-ethnic, 5% were Latino, and 2% were African-American.
- 80% of the students were depressed, 47% had relationship problems, 22% had academic problems, and 18% had financial problems.
- 20% were on psychiatric medication, and 15% were known to have had previous psychiatric hospitalizations.
- 23% committed suicide by firearm, 32% by hanging, 17% by toxic substances, 12% by jumping, and 17% by other means.
- Half of the suicides occurred on a weekday and half on weekends.
- Lowest months for suicides-July, August, December and January.
- Highest suicide months: March, April, November
- In 68% of the suicides (to the extent known) students gave no warning of suicidal intent.

18. Percentage of campuses that provide services thought to be essential for addressing suicidal behavior (Item 40).

- 74% Targeted programs for faculty/coaches/advisors/resident assts.
- 71% Off-campus referral networks
- 70% Emergency services
- 69% Stress reduction programs
- 69% Medical leave policies
- 65% On-site medical services
- 56% Adequately staffed counseling centers
- 55% Broad based campus –wide educational programs
- 50% On-site psychiatric services
- 52% Depression screening days
- 44% Education programs and materials for parents/families
- 35% Non-clinical student support network
- 32% Post-Vention programs

19. 27 of the responding centers (10%) reported a total of 54 instances when it was necessary to give warning to a third party about a student who posed a specific danger to another person. In 71% of these cases police were notified, 61% notified the potential victim and 39% indicated others, which included the Dean of Students, the campus community, guardians, Residence Life, child protection agencies, and the campus risk assessment team. (Item 41)

20. 60% of directors reported that because of recent tragedies that have occurred on college campuses due to emotionally disturbed students, they have come under increasing pressure to share concerns about troubled students who might pose a risk to others even though the threat was not to a specific person. In responding to this pressure the following percentage of directors report that they would:

- Ask these students for permission to alert family, residence staff, or institutional administration about these concerns (74%).
 - Express concerns to student and notify others with or without consent (26%).
 - Write-in comments suggest that each situation would be handled on a case by case basis and would be handled in the best interests of the student and the community (Item 43).
21. 22% of directors report that there has been a marked increase in student-to-student violence on their campuses over the past 5 years (Item 44).
22. A majority of counseling centers (59 and 64%) now ask former clients if their counseling experience helped them remain enrolled in their institutions and/or whether it helped with their academic performance. In spite of the fact that most students do not come to counseling centers for these specific reasons, 58% indicated that it helped them remain in school and 63% stated that counseling helped better their academic performance (Items 45-46).
23. 9% of counseling center clients from the surveyed schools were referred to external practitioners for more specialized or intensive treatment (Item 47).
24. 86% of centers maintain the right to refuse treatment to a student whose problems appear to be beyond the capability of the center to handle. However, 49% of responding directors report that they would not deny service in such cases if the student refused an outside referral and demanded to be seen at the center. 74 % of these centers have a written policy that covers such cases (Up 22%since 2009) and 51% of the centers that do have such a policy have had the policy approved by the school's legal counsel (Up 12%) (Items 48-50).
25. When a student asks for an appointment at your center (Item 51):
- 24% of centers triage and then assign student to a counselor
 - 18% triage then provide further assessment before assigning a counselor
 - 59% assign student directly to a counselor who does assessment and counseling
26. Percentage of directors who would inform the person to whom they report even without the student's permission under the following circumstances:
- 70% A student reports to a counselor that his roommate is planning to set off a smoke bomb in a large auditorium and fears someone might get hurt.
 - 70% A student whose psychological state is such that he/she might pose a danger to other students.
 - 53% A resident student who is a suicidal. Requiring hospitalization.
 - 26% A resident student reports that he is HIV positive and is sexually active on campus.

- 11% A student reports that he/she has been raped by a resident assistant but doesn't want to make it public.
- 5% A student who has some potential for suicide.
- 5% A resident student who admits making obscene phone calls to other students in residence.
- 4% A student admits kleptomania tendencies and who has been stealing from other students in residence.

These questions were asked in the 1992 and 1997 director surveys. Over that period of time directors had become much less likely to share information without a signed release form. However, given the intense focus on the responsibilities of counseling center professionals following recent tragedies on college campuses, directors are much more likely now to share information about students who pose danger to other students as in the top four categories above. Vice Presidents were also contacted in the 1997 survey and were overwhelmingly in favor of wanting to be informed about these situations. Given the current environment, today's chief student affairs officers would probably share similar views.

27. If a campus-wide crisis intervention team or a senior administrator reported concerns about a student who appears to be emotionally disturbed, and perhaps scary to others, how would directors respond to the following scenarios: (See item 56 for complete responses)

- The student had been previously been seen at your center and is not amenable to further counseling.
 - 82% of directors would inform the committee or administrator of this indicating that the student declined further treatment but was not perceived, at that time, to pose a threat to self or others.
- The student is currently being seen at the center.
 - 75% of directors would inform the student (through the treating therapist) of the administrative concern and seek permission to inform the committee or administrator that the student is being seen at the center and is not perceived to be an imminent threat at that time.
- The student has not been seen at the center.
 - 40% of directors would recommend that the student be referred to the counseling center and if the referral was refused to initiate the school's mandated counseling policy.
 - 27% would recommend that if student refused referral that counseling center would contact student and encourage counseling.
 - 16.5% would recommend referral to the counseling center with no follow-up if student does not comply.
 - 16.5 % would respond in some other way.
- The student accepts referral to center but does not continue in therapy. Therapist does not view student as danger to self or others but student continues to be worrisome to others on campus.

- 50% of directors would not comment on student's counseling outcomes and that further action would have to be assumed by the administration.
- 25% of directors would report that the student is not open to further counseling, and that, if the concern is considered to be significant, other administrative actions should be considered such as mandated counseling or the involvement of parents.
- 25% of directors would respond in other ways

28. Check item 57 for director's salaries broken down by size of institution, number of FTE staff, and experience as director.

29. On item 58 directors are asked to rate how essential certain counseling center services are and also to rate how they believe these services are rated by the person to whom they report (call them VP's). On the vast majority of provided services, directors believe that their direct reports are in reasonably close agreement with their own views. Their bosses, however, tend to value somewhat less, extensive psychotherapy (27 to 17%) and group therapy (43 to 31%). The most significant perceived difference was on the acceptance of mandated referrals to the counseling center by judicial boards and administrators. Only 30% of directors view this as very or highly essential while they believe 59% of their direct reports would view it as similarly important.

This annual survey is conducted by Robert P. Gallagher. Dr. Gallagher is the former Vice Chancellor for Student Affairs at the University of Pittsburgh and was a Counseling Center Director for 25 years. He is currently an Adjunct Associate Professor in the Administrative and Policy Studies Department in the School of Education. He can be reached at rgallagh@pitt.edu

| | | | | | | | | |
|---------------------------|-------|-----|---|-------|-----|--|--------|------|
| Director's Gender: | | | Racial/Ethnic Background: | | | Staff Member's Gender | | |
| Male | 41.2% | 119 | African American | 5.8% | 17 | Male | 31.11% | 547 |
| Female | 58.8% | 170 | Hispanic American | 1.7% | 5 | Female | 68.89% | 1211 |
| School Size: | | | Native American | 0.3% | 1 | Staff Member's Orientation | | |
| Under 2,500 | 29.7% | 87 | White/Caucasian | 86.3% | 251 | Gay/Lesbian/Bisexual | 9.94% | 168 |
| 2,500 - 7,500 | 27% | 79 | Asian American | 3.8% | 11 | Heterosexual | 90.06% | 1522 |
| 7,500 - 15,000 | 22.2% | 65 | Other | 2.1% | 6 | Staff Member's Ethnicity | | |
| 15,000 and over | 21.2% | 62 | Director's Professional Identity | | | African American | 9.69% | 171 |
| | | | Clinical Psychologist | 28.8% | 84 | Asian American | 5.72% | 101 |
| | | | Counseling Psychologist | 35.3% | 103 | Hispanic American | 4.14% | 73 |
| | | | Psychiatrist | 0.7% | 2 | Native American | 0.45% | 8 |
| | | | Mental Health Professional | 4.8% | 14 | White/Caucasian | 77.9% | 1375 |
| | | | Social Worker | 9.2% | 27 | Other | 2.1% | 37 |
| | | | Student Personnel Administrator | 0.7% | 2 | A wide variety of different ethnicities or countries of origin were listed including Jewish, Lebanese, Indian, Pakistani, Arabic, Ethiopian, and Persian- American | | |
| | | | Professional Counselor | 17.1% | 50 | | | |
| | | | RN or Nurse Practitioner | 1.4% | 4 | | | |
| | | | Family Therapist | 1% | 3 | | | |
| | | | Internal Medical Physician | 0.3% | 1 | | | |
| | | | Other | 0.7% | 2 | | | |

Total number of students eligible for counseling in the 293 schools represented in the survey: 2,671,400

| School Size | | | | | | | | | | | | | | | | |
|--|-----------|---------------|-------------------------------|----------|---------------|--------------------------------|--------|---------------|---------------------|----------|---------------|----------------|----------|---------------|---------|--|
| Under 2,500 n=87 | | | Between 2,500 - 7,500 n=79 | | | Between 7,500 - 15,000 n=65 | | | Over 15,000 n=62 | | | Total n=293 | | | | |
| | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | |
| 1.) Total number of students eligible for counseling on your campus: | | | | | | | | | | | | | | | | |
| | 1.6K | 300 – 2.5K | 140K | 4.6K | 2.6K – 7.3K | 364.5K | 10.1K | 4.8K – 14.9K | 655.9K | 24.4K | 15K – 50.3K | 1511K | 9.1K | 300 – 50.3K | 2671.4K | |
| 1a.) Total number of students who sought counseling during the past year for individual or group counseling: | | | | | | | | | | | | | | | | |
| | 236.8 | 50 – 800 | 20.1K | 413.2 | 50 – 1.2K | 30.6K | 927.6 | 75 – 3.3K | 52.9K | 1.9K | 525 – 15.2K | 108.1K | 778.2 | 50 – 15.2K | 211.7K | |
| 1b.) Percent of student body that sought counseling last year: | | | | | | | | | | | | | | | | |
| | 15.2% | 2.3 – 41.7% | 85 | 9.3% | 1 – 21.7% | 74 | 8.7% | 0.6 – 27.7% | 57 | 6.6% | 0.3 – 19% | 55 | 10.4% | 0.3 – 41.7% | 271 | |
| 2.) During the academic year, how many FTE mental health professionals provide services in the counseling center or elsewhere on campus? (include all paid staff and interns but not unpaid trainees) | | | | | | | | | | | | | | | | |
| | 2.3 | 0 – 7 | 195 | 3.7 | 0 – 13 | 289 | 7.1 | 0 – 21 | 445 | 13.4 | 4 – 32 | 766 | 6 | 0 – 32 | 1.7K | |
| 2b.) Ratio of mental health professionals to students: | | | | | | | | | | | | | | | | |
| | 1 : 867.3 | 1:150-1:2.5K | | 1 : 1.6K | 1:422-1:5.5K | | 1 : 2K | 1:447-1:8.3K | | 1 : 2.1K | 1:841-1:5.2K | | 1 : 1.6K | 1:150-1:8.3K | | |
| 3.) Approximately how many students a year have contact with your staff apart from individual or group counseling? (This would include workshops, orientation programs, classroom presentations, etc.) | | | | | | | | | | | | | | | | |
| | 553.5 | 20 – 2.5K | 45.4K | 1.3K | 70 – 6.8K | 83.8K | 3.2K | 200 – 11.5K | 162.9K | 5.9K | 20 – 38.6K | 287K | 2.3K | 20 – 38.6K | 579K | |
| 3b.) Percentage of student body seen in other contexts during the year: | | | | | | | | | | | | | | | | |
| | 35.4% | 0.9 – 100% | 82 | 27.4% | 1.4 – 100% | 67 | 30.5% | 1.3 – 100% | 51 | 21.7% | 0.1 – 73.2% | 49 | 29.5% | 0.1 – 100% | 249 | |
| 4a.) Check the statement below that is most in line with your session limit policy: | | | | | | | | | | | | | | | | |
| We tend to limit (with some exceptions) the number of client counseling sessions allowed. | | 19.5% | 17 | | 20.8% | 16 | | 31.7% | 20 | | 50% | 30 | | 28.9% | 83 | |
| We do not have a session limit, but promote ourselves as a short-term service and rely on clinicians to make responsible judgments about length of treatment. | | 43.7% | 38 | | 54.5% | 42 | | 52.4% | 33 | | 41.7% | 25 | | 48.1% | 138 | |
| We see students as long as necessary to resolve the client issues but will make external referrals when deemed clinically advisable. | | 36.8% | 32 | | 24.7% | 19 | | 15.9% | 10 | | 8.3% | 5 | | 23% | 66 | |
| 4b.) What was your client session average last year? | | | | | | | | | | | | | | | | |
| | 6.4 | 1 – 16 | | 6.3 | 0 – 60 | | 6.4 | 3 – 50 | | 5.3 | 3 – 12 | | 6.2 | 0 – 60 | | |
| 5.) Are there on-campus psychiatric services available at your school? | | | | | | | | | | | | | | | | |
| Yes | | 30.2% | 26 | | 53.2% | 42 | | 65.1% | 41 | | 88.7% | 55 | | 56.6% | 164 | |
| No | | 69.8% | 60 | | 46.8% | 37 | | 34.9% | 22 | | 11.3% | 7 | | 43.4% | 126 | |
| 6.) Number of psychiatric consultation hours per week available: | | | | | | | | | | | | | | | | |
| | 8.3 | 1 – 26 | 217 | 8.1 | 1 – 50 | 331 | 24.2 | 2 – 145 | 919 | 44.2 | 2 – 300 | 2.2K | 23.6 | 1 – 300 | 3.6K | |
| 6b.) Psychiatric consultation hours per 1000 students: | | | | | | | | | | | | | | | | |
| | 5.4 | 0.9 – 23.3 | | 1.8 | 0.2 – 14.3 | | 2.3 | 0 – 13.4 | | 2.2 | 0.1 – 21.4 | | 2.7 | 0 – 23.3 | | |
| 7.) If a psychiatrist is working on campus, is it necessary for a student receiving medication to be in therapy? | | | | | | | | | | | | | | | | |
| Yes, and with a therapist in the Center | | 46.2% | 12 | | 53.7% | 22 | | 47.5% | 19 | | 32.7% | 18 | | 43.8% | 71 | |
| Yes, either with a Center therapist or an external therapist | | 26.9% | 7 | | 17.1% | 7 | | 17.5% | 7 | | 5.5% | 3 | | 14.8% | 24 | |
| No, it is possible to obtain medication without ongoing therapy, just regular med checks by psychiatrist | | 26.9% | 7 | | 29.3% | 12 | | 35% | 14 | | 61.8% | 34 | | 41.4% | 67 | |
| 8.) If you have access to psychiatrists in your Center, what role does he/she play? (check all that apply) | | | | | | | | | | | | | | | | |
| Psychiatric assessment | | 96.2% | 25 | | 95.2% | 40 | | 80.5% | 33 | | 83.6% | 46 | | 87.8% | 144 | |
| Prescribing medication | | 96.2% | 25 | | 95.2% | 40 | | 80.5% | 33 | | 85.5% | 47 | | 88.4% | 145 | |
| Individual consultation with other professional staff | | 84.6% | 22 | | 85.7% | 36 | | 75.6% | 31 | | 74.5% | 41 | | 79.3% | 130 | |
| Consultation at case conference meetings | | 69.2% | 18 | | 59.5% | 25 | | 53.7% | 22 | | 61.8% | 34 | | 60.4% | 99 | |
| Supervision of interns | | 3.8% | 1 | | 2.4% | 1 | | 4.9% | 2 | | 5.5% | 3 | | 4.3% | 7 | |
| Staff presentations | | 38.5% | 10 | | 19% | 8 | | 39% | 16 | | 41.8% | 23 | | 34.8% | 57 | |
| Providing psychotherapy | | 7.7% | 2 | | 4.8% | 2 | | 4.9% | 2 | | 9.1% | 5 | | 6.7% | 11 | |
| Other | | 3.8% | 1 | | 2.4% | 1 | | 9.8% | 4 | | 5.5% | 3 | | 5.5% | 9 | |
| Common 'other' responses included Director, Supervision of Nurse Practitioners or Psychiatric Residents, Triage, Participation on inter-disciplinary teams. | | | | | | | | | | | | | | | | |

| School Size | | | | | | | | | | | | | | | | |
|---|---------------------|---------------|----|-------------------------------|---------------|----|--------------------------------|---------------|----|---------------------|---------------|----|----------------|---------------|-----|--|
| | Under 2,500 n=87 | | | Between 2,500 - 7,500 n=79 | | | Between 7,500 - 15,000 n=65 | | | Over 15,000 n=62 | | | Total n=293 | | | |
| | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | |
| 9.) Do you believe that there has been an increase in the number of students arriving on your campus that are already on psychiatric medication? | | | | | | | | | | | | | | | | |
| Yes | | 86.6% | 71 | | 80.8% | 59 | | 88.5% | 54 | | 87.7% | 50 | | 85.7% | 234 | |
| No | | 13.4% | 11 | | 19.2% | 14 | | 11.5% | 7 | | 12.3% | 7 | | 14.3% | 39 | |
| 10.) Estimate the percentage of your center's clients that are taking psychiatric medication: | | | | | | | | | | | | | | | | |
| | 23.9% | 1 – 75% | 79 | 24.4% | 1 – 80% | 69 | 24.8% | 1 – 70% | 57 | 24.6% | 5 – 75% | 53 | 24.4% | 1 – 80% | 258 | |
| 11.) Approximately what percentage of your clients are referred for psychiatric evaluation: | | | | | | | | | | | | | | | | |
| | 11.8% | 0 – 40% | 77 | 12.6% | 1 – 39% | 66 | 16.1% | 1 – 50% | 55 | 16.3% | 1 – 50% | 50 | 13.9% | 0 – 50% | 248 | |
| 12.) There has been a widely reported trend in recent years of an increase in students arriving at counseling centers with serious psychological problems. Has this been true at your Center? | | | | | | | | | | | | | | | | |
| Yes | | 84.1% | 69 | | 87.3% | 62 | | 91.9% | 57 | | 89.3% | 50 | | 87.8% | 238 | |
| No | | 15.9% | 13 | | 12.7% | 9 | | 8.1% | 5 | | 10.7% | 6 | | 12.2% | 33 | |
| 13. Compared to five years ago, what changes have you noticed in the number of clients with: | | | | | | | | | | | | | | | | |
| 13a.) Crisis issues requiring an immediate response | | | | | | | | | | | | | | | | |
| Increase | | 59.8% | 49 | | 69.4% | 50 | | 79.7% | 47 | | 89.8% | 53 | | 73.2% | 199 | |
| No Change | | 37.8% | 31 | | 30.6% | 22 | | 20.3% | 12 | | 10.2% | 6 | | 26.1% | 71 | |
| Decrease | | 2.4% | 2 | | 0% | 0 | | 0% | 0 | | 0% | 0 | | 0.7% | 2 | |
| 13b.) Sexual assault concerns (on-campus) | | | | | | | | | | | | | | | | |
| Increase | | 32.9% | 27 | | 25.4% | 18 | | 37.9% | 22 | | 32.8% | 19 | | 32% | 86 | |
| No Change | | 65.9% | 54 | | 70.4% | 50 | | 56.9% | 33 | | 65.5% | 38 | | 65.1% | 175 | |
| Decrease | | 1.2% | 1 | | 4.2% | 3 | | 5.2% | 3 | | 1.7% | 1 | | 3% | 8 | |
| 13c.) Problems related to earlier sexual abuse | | | | | | | | | | | | | | | | |
| Increase | | 33.3% | 27 | | 25% | 18 | | 30.5% | 18 | | 29.3% | 17 | | 29.6% | 80 | |
| No Change | | 65.4% | 53 | | 75% | 54 | | 67.8% | 40 | | 70.7% | 41 | | 69.6% | 188 | |
| Decrease | | 1.2% | 1 | | 0% | 0 | | 1.7% | 1 | | 0% | 0 | | 0.7% | 2 | |
| 13d.) Alcohol problems | | | | | | | | | | | | | | | | |
| Increase | | 31.7% | 26 | | 34.7% | 25 | | 37.9% | 22 | | 41.4% | 24 | | 35.9% | 97 | |
| No Change | | 65.9% | 54 | | 62.5% | 45 | | 60.3% | 35 | | 58.6% | 34 | | 62.2% | 168 | |
| Decrease | | 2.4% | 2 | | 2.8% | 2 | | 1.7% | 1 | | 0% | 0 | | 1.9% | 5 | |
| 13e.) Other illicit drug use | | | | | | | | | | | | | | | | |
| Increase | | 43.9% | 36 | | 44.4% | 32 | | 53.4% | 31 | | 53.4% | 31 | | 48.1% | 130 | |
| No Change | | 52.4% | 43 | | 54.2% | 39 | | 46.6% | 27 | | 46.6% | 27 | | 50.4% | 136 | |
| Decrease | | 3.7% | 3 | | 1.4% | 1 | | 0% | 0 | | 0% | 0 | | 1.5% | 4 | |
| 13f.) Learning disabilities | | | | | | | | | | | | | | | | |
| Increase | | 63.4% | 52 | | 55.6% | 40 | | 58.6% | 34 | | 58.6% | 34 | | 59.3% | 160 | |
| No Change | | 35.4% | 29 | | 44.4% | 32 | | 37.9% | 22 | | 41.4% | 24 | | 39.6% | 107 | |
| Decrease | | 1.2% | 1 | | 0% | 0 | | 3.4% | 2 | | 0% | 0 | | 1.1% | 3 | |
| 13g.) Self-injury (e.g., cutting) | | | | | | | | | | | | | | | | |
| Increase | | 39% | 32 | | 33.8% | 24 | | 37.3% | 22 | | 50% | 29 | | 39.6% | 107 | |
| No Change | | 53.7% | 44 | | 62% | 44 | | 62.7% | 37 | | 48.3% | 28 | | 56.7% | 153 | |
| Decrease | | 7.3% | 6 | | 4.2% | 3 | | 0% | 0 | | 1.7% | 1 | | 3.7% | 10 | |
| 13h.) Eating disorders | | | | | | | | | | | | | | | | |
| Increase | | 20.7% | 17 | | 26.8% | 19 | | 31% | 18 | | 25.9% | 15 | | 25.7% | 69 | |
| No Change | | 74.4% | 61 | | 63.4% | 45 | | 65.5% | 38 | | 67.2% | 39 | | 68% | 183 | |
| Decrease | | 4.9% | 4 | | 9.9% | 7 | | 3.4% | 2 | | 6.9% | 4 | | 6.3% | 17 | |
| 13i.) Career planning issues | | | | | | | | | | | | | | | | |
| Increase | | 22.5% | 18 | | 16.9% | 12 | | 37% | 20 | | 14% | 8 | | 22.1% | 58 | |
| No Change | | 73.8% | 59 | | 76.1% | 54 | | 55.6% | 30 | | 71.9% | 41 | | 70.2% | 184 | |
| Decrease | | 3.8% | 3 | | 7% | 5 | | 7.4% | 4 | | 14% | 8 | | 7.6% | 20 | |

| School Size | | | | | | | | | | | | | | | | |
|--|---------------------|---------------|-----|-------------------------------|---------------|-----|--------------------------------|---------------|-----|---------------------|---------------|-----|----------------|---------------|-----|--|
| | Under 2,500 n=87 | | | Between 2,500 - 7,500 n=79 | | | Between 7,500 - 15,000 n=65 | | | Over 15,000 n=62 | | | Total n=293 | | | |
| | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | |
| 13.j.) Medication issues | | | | | | | | | | | | | | | | |
| Increase | | 58.5% | 48 | | 63.9% | 46 | | 72.4% | 42 | | 76.3% | 45 | | 66.8% | 181 | |
| No Change | | 40.2% | 33 | | 34.7% | 25 | | 25.9% | 15 | | 23.7% | 14 | | 32.1% | 87 | |
| Decrease | | 1.2% | 1 | | 1.4% | 1 | | 1.7% | 1 | | 0% | 0 | | 1.1% | 3 | |
| 14.a.) What percentage of your clients would you say have impairment so severe that they are unable to remain in school or can only do so with ongoing psychological/psychiatric assistance? | | | | | | | | | | | | | | | | |
| | 4.6% | 0 – 38% | 82 | 5.9% | 0 – 25% | 70 | 8.9% | 0 – 40% | 59 | 6.3% | 1 – 20% | 51 | 6.2% | 0 – 40% | 262 | |
| 14.b.) What percentage of your clients have periods of severe distress (depression, anxiety, panic attacks, suicidal ideation, etc.), but can be treated successfully within the time-limits and available treatment modalities existing at your Center? | | | | | | | | | | | | | | | | |
| | 27.2% | 1 – 98% | 80 | 30.1% | 2 – 90% | 66 | 37.3% | 1 – 95% | 57 | 39.3% | 8 – 95% | 51 | 32.7% | 1 – 98% | 254 | |
| 14.c.) Total percent of students with severe problems: | | | | | | | | | | | | | | | | |
| | 31.7% | 1 – 100% | 80 | 36.1% | 3 – 100% | 65 | 46.1% | 1 – 100% | 57 | 44.6% | 11 – 100% | 50 | 38.7% | 1 – 100% | 252 | |
| 15.) What actions has your center taken in response to the large number of students arriving at your center with significant psychological problems? (check all that apply) | | | | | | | | | | | | | | | | |
| Increased training for staff in working with difficult cases | | 50.6% | 44 | | 49.4% | 39 | | 56.9% | 37 | | 69.4% | 43 | | 55.6% | 163 | |
| Increased training in time-limited therapy | | 19.5% | 17 | | 17.7% | 14 | | 24.6% | 16 | | 33.9% | 21 | | 23.2% | 68 | |
| Increased psychiatric consultation hours | | 19.5% | 17 | | 32.9% | 26 | | 30.8% | 20 | | 53.2% | 33 | | 32.8% | 96 | |
| Increased training of faculty and others on campus to help them respond in helpful ways to students in trouble and to make more appropriate referrals | | 62.1% | 54 | | 55.7% | 44 | | 72.3% | 47 | | 80.6% | 50 | | 66.6% | 195 | |
| Served on interdisciplinary committee aimed at the early identification of troubled students | | 69% | 60 | | 65.8% | 52 | | 73.8% | 48 | | 79% | 49 | | 71.3% | 209 | |
| Provided more mandated suicide assessments | | 20.7% | 18 | | 19% | 15 | | 30.8% | 20 | | 27.4% | 17 | | 23.9% | 70 | |
| Provided depression screening days for students | | 49.4% | 43 | | 41.8% | 33 | | 43.1% | 28 | | 54.8% | 34 | | 47.1% | 138 | |
| Expanded external referral network | | 56.3% | 49 | | 51.9% | 41 | | 60% | 39 | | 71% | 44 | | 59% | 173 | |
| Working with clients and others who work with students to normalize emotional distress | | 62.1% | 54 | | 55.7% | 44 | | 50.8% | 33 | | 61.3% | 38 | | 57.7% | 169 | |
| Encouraging student organizations and others who work with students to help students develop better coping and resiliency skills | | 40.2% | 35 | | 48.1% | 38 | | 44.6% | 29 | | 50% | 31 | | 45.4% | 133 | |
| Skills training for clients to help them learn to tolerate and manage mild to moderate emotional discomfort without medication | | 57.5% | 50 | | 53.2% | 42 | | 64.6% | 42 | | 66.1% | 41 | | 59.7% | 175 | |
| Other | | 6.9% | 6 | | 10.1% | 8 | | 6.2% | 4 | | 1.6% | 1 | | 6.5% | 19 | |
| The most common 'other' response was the hiring of more clinical staff, interns or practicum students. Other responses include directing more students with less severe problems to groups, the enhancement of emergency assessment and intervention programs, expanding student- to- student support programs, and the hiring of a case manager/referral coordinator. | | | | | | | | | | | | | | | | |
| 16.) Has your center hospitalized a student for psychological reasons in the past year? | | | | | | | | | | | | | | | | |
| Yes | | 79.5% | 66 | | 89% | 65 | | 95.2% | 60 | | 100% | 59 | | 89.9% | 250 | |
| No | | 20.5% | 17 | | 11% | 8 | | 4.8% | 3 | | 0% | 0 | | 10.1% | 28 | |
| 17.) If yes, how many were hospitalized? | | | | | | | | | | | | | | | | |
| | 4 | 1 – 18 | 261 | 5.2 | 1 – 13 | 338 | 9.9 | 1 – 46 | 543 | 16.9 | 1 – 71 | 898 | 8.5 | 1 – 71 | 2K | |
| 18.) Number of students hospitalized per 1000: | | | | | | | | | | | | | | | | |
| | 2.5 | 0 – 10 | | 1.2 | 0.2 – 3.8 | | 1 | 0 – 4 | | 0.9 | 0 – 11.4 | | 1.5 | 0 – 11.4 | | |
| For a counselor who does not have other major responsibilities (Training Director, Clinical Director, etc.) and extrapolating to a 40 hour week: | | | | | | | | | | | | | | | | |
| 19a.) How many hours per week are available (on average) for counselors providing one-on-one counseling? | | | | | | | | | | | | | | | | |
| | 25.1 | 10 – 35 | | 23.5 | 8 – 34 | | 23.2 | 12 – 33 | | 21.5 | 5 – 32 | | 23.4 | 5 – 35 | | |
| 19b.) How many hours are available for other direct services to students (group work, workshops, classroom talks, etc.)? | | | | | | | | | | | | | | | | |
| | 5.3 | 0 – 17 | | 5.6 | 0 – 16 | | 5.4 | 0 – 17 | | 5.4 | 0 – 10 | | 5.4 | 0 – 17 | | |
| 19c.) How many hours per week are set aside for all other tasks (staff meetings, supervision, clinical notes, contact with faculty, parents, staff development, etc.)? | | | | | | | | | | | | | | | | |
| | 8.7 | 1 – 20 | | 9.8 | 0 – 20 | | 10 | 0 – 23 | | 12.3 | 4 – 30 | | 10.1 | 0 – 30 | | |
| 19d.) Total | | | | | | | | | | | | | | | | |
| | 39.1 | 27 – 40 | | 38.8 | 13 – 40 | | 38.7 | 21 – 40 | | 39.2 | 25 – 40 | | 38.9 | 13 – 40 | | |
| 20.) Has the number of students seeking help in your center been increasing in recent years? | | | | | | | | | | | | | | | | |
| Yes | | 82.7% | 67 | | 92.9% | 65 | | 100% | 62 | | 94.8% | 55 | | 91.9% | 249 | |
| No | | 17.3% | 14 | | 7.1% | 5 | | 0% | 0 | | 5.2% | 3 | | 8.1% | 22 | |

| School Size | | | | | | | | | | | | | | | | |
|--|------|---------------|----|-------------------------------|---------------|----|--------------------------------|---------------|----|---------------------|---------------|----|----------------|---------------|-----|--|
| Under 2,500 n=87 | | | | Between 2,500 - 7,500 n=79 | | | Between 7,500 - 15,000 n=65 | | | Over 15,000 n=62 | | | Total n=293 | | | |
| | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | |
| 21.) Has the increase in students with more serious psychological issues, in addition to the increased number of students seeking assistance pose staffing difficulties for you? (respond only if you have growth in numbers of clients and students with more complex problems) | | | | | | | | | | | | | | | | |
| Yes | | 76.6% | 59 | | 88.7% | 63 | | 95% | 57 | | 93.1% | 54 | | 87.6% | 233 | |
| No | | 23.4% | 18 | | 11.3% | 8 | | 5% | 3 | | 6.9% | 4 | | 12.4% | 33 | |
| 22.) If yes to the previous question, how have you handled the problem? (check all that apply) | | | | | | | | | | | | | | | | |
| Hired new counseling staff | | 28.8% | 17 | | 33.3% | 21 | | 35.1% | 20 | | 70.4% | 38 | | 41.2% | 96 | |
| Part-time staff are added during busy times | | 18.6% | 11 | | 27% | 17 | | 31.6% | 18 | | 55.6% | 30 | | 32.6% | 76 | |
| Staff take on an overload at busy times and reduce other center involvements | | 57.6% | 34 | | 73% | 46 | | 64.9% | 37 | | 66.7% | 36 | | 65.7% | 153 | |
| Staff are expected to manage case load so that no wait list develops | | 42.4% | 25 | | 54% | 34 | | 43.9% | 25 | | 44.4% | 24 | | 46.4% | 108 | |
| Non-critical clients seen less frequently | | 66.1% | 39 | | 65.1% | 41 | | 78.9% | 45 | | 81.5% | 44 | | 72.5% | 169 | |
| No automatic weekly appointments. Students seen as schedule permits. | | 30.5% | 18 | | 46% | 29 | | 43.9% | 25 | | 48.1% | 26 | | 42.1% | 98 | |
| Assigning more students to groups directly from intake/assessment | | 3.4% | 2 | | 19% | 12 | | 17.5% | 10 | | 46.3% | 25 | | 21% | 49 | |
| Using telephone assessment/intake system | | 5.1% | 3 | | 6.3% | 4 | | 10.5% | 6 | | 16.7% | 9 | | 9.4% | 22 | |
| Using an urgent care triage system | | 27.1% | 16 | | 28.6% | 18 | | 38.6% | 22 | | 55.6% | 30 | | 36.9% | 86 | |
| Making more use of external referrals | | 39% | 23 | | 39.7% | 25 | | 54.4% | 31 | | 68.5% | 37 | | 49.8% | 116 | |
| More focus on brief therapy models | | 37.3% | 22 | | 39.7% | 25 | | 61.4% | 35 | | 46.3% | 25 | | 45.9% | 107 | |
| Extended evening hours | | 23.7% | 14 | | 6.3% | 4 | | 8.8% | 5 | | 18.5% | 10 | | 14.2% | 33 | |
| Other | | 8.5% | 5 | | 15.9% | 10 | | 7% | 4 | | 1.9% | 1 | | 8.6% | 20 | |
| 23.) Have any students on your campus committed suicide in the past year? | | | | | | | | | | | | | | | | |
| Yes | | 7.2% | 6 | | 14.9% | 11 | | 31.1% | 19 | | 55.4% | 31 | | 24.5% | 67 | |
| No | | 92.8% | 77 | | 85.1% | 63 | | 68.9% | 42 | | 44.6% | 25 | | 75.5% | 207 | |
| 23b.) If yes, how many? | | | | | | | | | | | | | | | | |
| | 1.2 | 1 – 2 | 7 | 1 | 1 | 11 | 1.5 | 1 – 3 | 28 | 2.1 | 1 – 5 | 60 | 1.6 | 1 – 5 | 106 | |
| If you have had one or more student suicides in the past year, please fill this out to the extent that you are able to do so. | | | | | | | | | | | | | | | | |
| Q24.) Center Client | | | | | | | | | | | | | | | | |
| Yes | | 28.57% | 2 | | 9.09% | 1 | | 21.43% | 6 | | 21.57% | 11 | | 20.62% | 20 | |
| No | | 71.43% | 5 | | 90.91% | 10 | | 78.57% | 22 | | 78.43% | 40 | | 79.38% | 77 | |
| Q25.) Gender | | | | | | | | | | | | | | | | |
| Female | | 57.14% | 4 | | 18.18% | 2 | | 19.23% | 5 | | 20.83% | 10 | | 22.83% | 21 | |
| Male | | 42.86% | 3 | | 81.82% | 9 | | 80.77% | 21 | | 79.17% | 38 | | 77.17% | 71 | |
| Q26.) Status and Years of Study | | | | | | | | | | | | | | | | |
| Undergrad 1 | | 0% | 0 | | 18.18% | 2 | | 40% | 8 | | 19.35% | 6 | | 23.88% | 16 | |
| Undergrad 2 | | 60% | 3 | | 27.27% | 3 | | 15% | 3 | | 9.68% | 3 | | 17.91% | 12 | |
| Undergrad 3 | | 20% | 1 | | 18.18% | 2 | | 30% | 6 | | 16.13% | 5 | | 20.9% | 14 | |
| Undergrad 4 | | 20% | 1 | | 27.27% | 3 | | 10% | 2 | | 25.81% | 8 | | 20.9% | 14 | |
| Undergrad 5+ | | 0% | 0 | | 0% | 0 | | 0% | 0 | | 0% | 0 | | 0% | 0 | |
| Graduate | | 0% | 0 | | 9.09% | 1 | | 5% | 1 | | 29.03% | 9 | | 16.42% | 11 | |
| Q27.) Method | | | | | | | | | | | | | | | | |
| Firearm | | 16.67% | 1 | | 40% | 4 | | 25% | 7 | | 17.5% | 7 | | 22.62% | 19 | |
| Hanging | | 33.33% | 2 | | 40% | 4 | | 35.71% | 10 | | 27.5% | 11 | | 32.14% | 27 | |
| Jumping | | 16.67% | 1 | | 10% | 1 | | 14.29% | 4 | | 10% | 4 | | 11.9% | 10 | |
| Poison/Overdose | | 16.67% | 1 | | 0% | 0 | | 10.71% | 3 | | 25% | 10 | | 16.67% | 14 | |
| Other | | 16.67% | 1 | | 10% | 1 | | 14.29% | 4 | | 20% | 8 | | 16.67% | 14 | |
| Q28.) Location | | | | | | | | | | | | | | | | |
| On Campus | | 28.57% | 2 | | 9.09% | 1 | | 28.57% | 8 | | 19.57% | 9 | | 21.74% | 20 | |
| Near Campus | | 0% | 0 | | 27.27% | 3 | | 7.14% | 2 | | 19.57% | 9 | | 15.22% | 14 | |
| Off Campus | | 71.43% | 5 | | 63.64% | 7 | | 64.29% | 18 | | 60.87% | 28 | | 63.04% | 58 | |

| School Size | | | | | | | | | | | | | | | | |
|---|---------------------|---------------|---|-------------------------------|---------------|---|--------------------------------|---------------|----|---------------------|---------------|----|----------------|---------------|----|--|
| | Under 2,500 n=87 | | | Between 2,500 - 7,500 n=79 | | | Between 7,500 - 15,000 n=65 | | | Over 15,000 n=62 | | | Total n=293 | | | |
| | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | |
| Q29.) Ethnicity | | | | | | | | | | | | | | | | |
| Asian/Pacific Islander | | 16.67% | 1 | | 0% | 0 | | 19.23% | 5 | | 9.3% | 4 | | 11.9% | 10 | |
| African American | | 16.67% | 1 | | 11.11% | 1 | | 0% | 0 | | 0% | 0 | | 2.38% | 2 | |
| Native American/Alaskan | | 0% | 0 | | 0% | 0 | | 0% | 0 | | 0% | 0 | | 0% | 0 | |
| White/Caucasian | | 66.67% | 4 | | 55.56% | 5 | | 76.92% | 20 | | 76.74% | 33 | | 73.81% | 62 | |
| Latino/Latina | | 0% | 0 | | 11.11% | 1 | | 3.85% | 1 | | 4.65% | 2 | | 4.76% | 4 | |
| Multi-Ethnic | | 0% | 0 | | 22.22% | 2 | | 0% | 0 | | 9.3% | 4 | | 7.14% | 6 | |
| Q30.) Risk Factors | | | | | | | | | | | | | | | | |
| Depression | | 80% | 4 | | 66.67% | 4 | | 94.44% | 17 | | 73.08% | 19 | | 80% | 44 | |
| Grades/Academic | | 20% | 1 | | 16.67% | 1 | | 11.11% | 2 | | 30.77% | 8 | | 21.82% | 12 | |
| Money/Finances | | 20% | 1 | | 33.33% | 2 | | 22.22% | 4 | | 11.54% | 3 | | 18.18% | 10 | |
| Legal Concerns | | 0% | 0 | | 33.33% | 2 | | 0% | 0 | | 0% | 0 | | 3.64% | 2 | |
| Health Issues | | 20% | 1 | | 0% | 0 | | 0% | 0 | | 11.54% | 3 | | 7.27% | 4 | |
| Relationship Issues | | 40% | 2 | | 50% | 3 | | 50% | 9 | | 46.15% | 12 | | 47.27% | 26 | |
| Q31.) Previous Attempts | | | | | | | | | | | | | | | | |
| Yes | | 33.33% | 2 | | 0% | 0 | | 18.52% | 5 | | 12.2% | 5 | | 14.46% | 12 | |
| No | | 16.67% | 1 | | 33.33% | 3 | | 22.22% | 6 | | 7.32% | 3 | | 15.66% | 13 | |
| Don't Know | | 50% | 3 | | 66.67% | 6 | | 59.26% | 16 | | 80.49% | 33 | | 69.88% | 58 | |
| Q32.) On Psychiatric Medication | | | | | | | | | | | | | | | | |
| Yes | | 33.33% | 2 | | 11.11% | 1 | | 22.22% | 6 | | 17.5% | 7 | | 19.51% | 16 | |
| No | | 33.33% | 2 | | 44.44% | 4 | | 18.52% | 5 | | 2.5% | 1 | | 14.63% | 12 | |
| Don't Know | | 33.33% | 2 | | 44.44% | 4 | | 59.26% | 16 | | 80% | 32 | | 65.85% | 54 | |
| Q33.) Prior Psychiatric Hospitalization | | | | | | | | | | | | | | | | |
| Yes | | 33.33% | 2 | | 0% | 0 | | 25.93% | 7 | | 7.5% | 3 | | 14.63% | 12 | |
| No | | 33.33% | 2 | | 55.56% | 5 | | 18.52% | 5 | | 10% | 4 | | 19.51% | 16 | |
| Don't Know | | 33.33% | 2 | | 44.44% | 4 | | 55.56% | 15 | | 82.5% | 33 | | 65.85% | 54 | |
| Q34.) Year | | | | | | | | | | | | | | | | |
| 2011 | | 16.67% | 1 | | 55.56% | 5 | | 56.52% | 13 | | 45% | 18 | | 47.44% | 37 | |
| 2012 | | 83.33% | 5 | | 44.44% | 4 | | 43.48% | 10 | | 55% | 22 | | 52.56% | 41 | |
| Q35.) Month | | | | | | | | | | | | | | | | |
| Jan | | 40% | 2 | | 0% | 0 | | 5% | 1 | | 3.57% | 1 | | 6.45% | 4 | |
| Feb | | 40% | 2 | | 11.11% | 1 | | 5% | 1 | | 3.57% | 1 | | 8.06% | 5 | |
| Mar | | 20% | 1 | | 11.11% | 1 | | 10% | 2 | | 17.86% | 5 | | 14.52% | 9 | |
| Apr | | 0% | 0 | | 22.22% | 2 | | 20% | 4 | | 25% | 7 | | 20.97% | 13 | |
| May | | 0% | 0 | | 0% | 0 | | 5% | 1 | | 10.71% | 3 | | 6.45% | 4 | |
| Jun | | 0% | 0 | | 0% | 0 | | 0% | 0 | | 14.29% | 4 | | 6.45% | 4 | |
| Jul | | 0% | 0 | | 0% | 0 | | 5% | 1 | | 0% | 0 | | 1.61% | 1 | |
| Aug | | 0% | 0 | | 0% | 0 | | 0% | 0 | | 0% | 0 | | 0% | 0 | |
| Sep | | 0% | 0 | | 22.22% | 2 | | 10% | 2 | | 3.57% | 1 | | 8.06% | 5 | |
| Oct | | 0% | 0 | | 11.11% | 1 | | 25% | 5 | | 7.14% | 2 | | 12.9% | 8 | |
| Nov | | 0% | 0 | | 11.11% | 1 | | 15% | 3 | | 10.71% | 3 | | 11.29% | 7 | |
| Dec | | 0% | 0 | | 11.11% | 1 | | 0% | 0 | | 3.57% | 1 | | 3.23% | 2 | |
| Q36.) Weekday/Weekend | | | | | | | | | | | | | | | | |
| Mon-Thu | | 83.33% | 5 | | 55.56% | 5 | | 31.58% | 6 | | 53.33% | 16 | | 50% | 32 | |
| Fri-Sun | | 16.67% | 1 | | 44.44% | 4 | | 68.42% | 13 | | 46.67% | 14 | | 50% | 32 | |
| Q37.) Student Indicated Suicidal Intent | | | | | | | | | | | | | | | | |
| Yes | | 25% | 1 | | 0% | 0 | | 66.67% | 6 | | 23.81% | 5 | | 32.43% | 12 | |
| No | | 75% | 3 | | 100% | 3 | | 33.33% | 3 | | 76.19% | 16 | | 67.57% | 25 | |
| Q38.) Considered Suicidal Risk | | | | | | | | | | | | | | | | |
| Yes | | 0% | 0 | | 33.33% | 1 | | 66.67% | 6 | | 29.41% | 5 | | 36.36% | 12 | |
| No | | 100% | 4 | | 66.67% | 2 | | 33.33% | 3 | | 70.59% | 12 | | 63.64% | 21 | |

| School Size | | | | | | | | | | | | | | | | |
|---|---------------------|---------------|----|-------------------------------|---------------|----|--------------------------------|---------------|----|---------------------|---------------|----|----------------|---------------|-----|--|
| | Under 2,500 n=87 | | | Between 2,500 - 7,500 n=79 | | | Between 7,500 - 15,000 n=65 | | | Over 15,000 n=62 | | | Total n=293 | | | |
| | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | |
| Q39.) Signed 'No Suicide' Contract | | | | | | | | | | | | | | | | |
| Yes | | 0% | 0 | | 0% | 0 | | 10% | 1 | | 11.76% | 2 | | 8.82% | 3 | |
| No | | 100% | 4 | | 100% | 3 | | 90% | 9 | | 88.24% | 15 | | 91.18% | 31 | |
| 40.) Since suicide is reported to be the second leading cause of death among 20-24 year olds, certain services are thought to be essential for addressing suicidal behavior on college campuses. Check the services that exist on your campus (check all that apply) | | | | | | | | | | | | | | | | |
| Depression screening days | | 52.9% | 46 | | 48.1% | 38 | | 55.4% | 36 | | 50% | 31 | | 51.5% | 151 | |
| Targeted education programs for faculty, coaches, clergy, and student/resident advisors | | 77% | 67 | | 69.6% | 55 | | 80% | 52 | | 71% | 44 | | 74.4% | 218 | |
| Broad based, campus wide, public education | | 56.3% | 49 | | 51.9% | 41 | | 56.9% | 37 | | 56.5% | 35 | | 55.3% | 162 | |
| Education programs and materials for parents and families | | 42.5% | 37 | | 39.2% | 31 | | 47.7% | 31 | | 46.8% | 29 | | 43.7% | 128 | |
| Adequately staffed counseling center | | 57.5% | 50 | | 58.2% | 46 | | 52.3% | 34 | | 53.2% | 33 | | 55.6% | 163 | |
| On-site psychiatric services | | 25.3% | 22 | | 46.8% | 37 | | 58.5% | 38 | | 80.6% | 50 | | 50.2% | 147 | |
| On-site medical services | | 48.3% | 42 | | 65.8% | 52 | | 73.8% | 48 | | 79% | 49 | | 65.2% | 191 | |
| Stress reduction programs | | 71.3% | 62 | | 67.1% | 53 | | 61.5% | 40 | | 77.4% | 48 | | 69.3% | 203 | |
| Non-clinical student support network | | 37.9% | 33 | | 38% | 30 | | 36.9% | 24 | | 27.4% | 17 | | 35.5% | 104 | |
| Off-campus referral network | | 77% | 67 | | 63.3% | 50 | | 78.5% | 51 | | 66.1% | 41 | | 71.3% | 209 | |
| Emergency services | | 60.9% | 53 | | 69.6% | 55 | | 75.4% | 49 | | 79% | 49 | | 70.3% | 206 | |
| Post-vention programs | | 25.3% | 22 | | 26.6% | 21 | | 38.5% | 25 | | 40.3% | 25 | | 31.7% | 93 | |
| Medical leave policies | | 70.1% | 61 | | 77.2% | 61 | | 64.6% | 42 | | 59.7% | 37 | | 68.6% | 201 | |
| 41a.) Has your Center had to give warning during the past year to a third party about a student who posed a specific danger to another person? | | | | | | | | | | | | | | | | |
| Yes | | 10.8% | 9 | | 11% | 8 | | 3.2% | 2 | | 14.3% | 8 | | 9.8% | 27 | |
| No | | 89.2% | 74 | | 89% | 65 | | 96.8% | 61 | | 85.7% | 48 | | 90.2% | 248 | |
| 41b.) If yes, how many cases? | | | | | | | | | | | | | | | | |
| | 1.3 | 1 – 2 | 12 | 3.4 | 1 – 10 | 27 | 1.5 | 1 – 2 | 3 | 1.7 | 1 – 6 | 12 | 2.1 | 1 – 10 | 54 | |
| 41c.) Who was notified? | | | | | | | | | | | | | | | | |
| Police | | 55.6% | 5 | | 62.5% | 5 | | 100% | 2 | | 88.9% | 8 | | 71.4% | 20 | |
| Potential victim | | 77.8% | 7 | | 50% | 4 | | 100% | 2 | | 44.4% | 4 | | 60.7% | 17 | |
| Other | | 22.2% | 2 | | 50% | 4 | | 50% | 1 | | 44.4% | 4 | | 39.3% | 11 | |
| Other' responses included Family, Dean of Students, Residence Life, and Behavioral Assessment Team. | | | | | | | | | | | | | | | | |
| 42.) Given some of the tragedies that have occurred on college campuses in recent years due to emotionally disturbed students, have you been under more pressure to share your concerns about troubled students who might pose a risk to others although not to a specific person? | | | | | | | | | | | | | | | | |
| Yes | | 59.8% | 49 | | 62.2% | 46 | | 57.1% | 36 | | 58.9% | 33 | | 59.6% | 164 | |
| No | | 40.2% | 33 | | 37.8% | 28 | | 42.9% | 27 | | 41.1% | 23 | | 40.4% | 111 | |
| 43.) If yes to the above, how has your center responded? | | | | | | | | | | | | | | | | |
| We are more likely to address our concerns with these students and ask for their permission to alert family, residence life staff, or higher level administration about our concerns | | 79.6% | 39 | | 63% | 29 | | 82.9% | 29 | | 73.3% | 22 | | 74.4% | 119 | |
| We are more likely to express our concerns to the student and alert others as indicated above with or without their permission | | 20.4% | 10 | | 37% | 17 | | 17.1% | 6 | | 26.7% | 8 | | 25.6% | 41 | |
| 44.) Some Directors have noted a marked increase in violent incidents involving students, ranging from assaults to murders. In your opinion, have incidents of violence among students on your campus: | | | | | | | | | | | | | | | | |
| Increased over the last five years | | 20.7% | 17 | | 12.3% | 9 | | 25.4% | 15 | | 32.7% | 18 | | 21.9% | 59 | |
| Remained the same over the last five years | | 79.3% | 65 | | 83.6% | 61 | | 72.9% | 43 | | 63.6% | 35 | | 75.8% | 204 | |
| Decreased over the last five years | | 0% | 0 | | 4.1% | 3 | | 1.7% | 1 | | 3.6% | 2 | | 2.2% | 6 | |
| 45.) Does your Center ask on an evaluation form if counseling has helped with a student's decision to remain enrolled in your institution? | | | | | | | | | | | | | | | | |
| Yes | | 54.3% | 44 | | 61.6% | 45 | | 59.7% | 37 | | 60% | 33 | | 58.7% | 159 | |
| No | | 45.7% | 37 | | 38.4% | 28 | | 40.3% | 25 | | 40% | 22 | | 41.3% | 112 | |
| 45b.) If yes, what percentage responded positively? | | | | | | | | | | | | | | | | |
| | 53.7% | 0 – 100% | 41 | 58.5% | 1 – 100% | 42 | 64.6% | 5 – 100% | 31 | 56.7% | 3 – 100% | 31 | 58.1% | 0 – 100% | 145 | |
| 46.) Does your Center ask on evaluation forms if counseling has helped with the student's academic performance? | | | | | | | | | | | | | | | | |
| Yes | | 59.5% | 47 | | 58.3% | 42 | | 62.9% | 39 | | 77.8% | 42 | | 63.7% | 170 | |
| No | | 40.5% | 32 | | 41.7% | 30 | | 37.1% | 23 | | 22.2% | 12 | | 36.3% | 97 | |

| School Size | | | | | | | | | | | | | | | | |
|--|---------------------|---------------|----|-------------------------------|---------------|----|--------------------------------|---------------|----|---------------------|---------------|----|----------------|---------------|-----|--|
| | Under 2,500 n=87 | | | Between 2,500 - 7,500 n=79 | | | Between 7,500 - 15,000 n=65 | | | Over 15,000 n=62 | | | Total n=293 | | | |
| | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | |
| 46b.) If yes, what percentage responded positively? | | | | | | | | | | | | | | | | |
| | 68.1% | 8 – 100% | 41 | 58.4% | 1 – 100% | 40 | 66% | 24 – 100% | 34 | 59.5% | 8 – 93% | 39 | 62.9% | 1 – 100% | 154 | |
| 47.) What percent of your clients are referred to external practitioners for more specialized or intensive treatment? | | | | | | | | | | | | | | | | |
| | 7% | 0 – 41% | 79 | 7.2% | 0 – 50% | 63 | 10.8% | 0 – 50% | 57 | 11.6% | 0 – 75% | 54 | 8.9% | 0 – 75% | 253 | |
| 48.) Does your center maintain the right to refuse treatment to a student whose problems appear to be beyond the capabilities of the center to handle? | | | | | | | | | | | | | | | | |
| Yes | | 83.8% | 67 | | 84.9% | 62 | | 87.1% | 54 | | 91.1% | 51 | | 86.3% | 234 | |
| No | | 16.2% | 13 | | 15.1% | 11 | | 12.9% | 8 | | 8.9% | 5 | | 13.7% | 37 | |
| 49.) If yes to the above, what if a student refuses an outside referral because of inconvenience or expense, and believes it is his or her right to be seen at the center for however many sessions the center typically allows. Would you deny treatment to this student? | | | | | | | | | | | | | | | | |
| Yes | | 41.3% | 26 | | 35.6% | 21 | | 57.7% | 30 | | 72.5% | 37 | | 50.7% | 114 | |
| No | | 58.7% | 37 | | 64.4% | 38 | | 42.3% | 22 | | 27.5% | 14 | | 49.3% | 111 | |
| 50.) If yes to the above, do you have a written policy that covers such cases? | | | | | | | | | | | | | | | | |
| Yes | | 57.7% | 15 | | 76.2% | 16 | | 69% | 20 | | 88.9% | 32 | | 74.1% | 83 | |
| No | | 42.3% | 11 | | 23.8% | 5 | | 31% | 9 | | 11.1% | 4 | | 25.9% | 29 | |
| 50b.) If you have such a policy, has it been approved by the school's legal counsel? | | | | | | | | | | | | | | | | |
| Yes | | 46.7% | 7 | | 43.8% | 7 | | 61.1% | 11 | | 51.6% | 16 | | 51.2% | 41 | |
| No | | 53.3% | 8 | | 56.2% | 9 | | 38.9% | 7 | | 48.4% | 15 | | 48.8% | 39 | |
| 51.) When students ask for an appointment at your center, what then happens? | | | | | | | | | | | | | | | | |
| They are triaged and then assigned to a counselor | | 13.6% | 11 | | 19.4% | 14 | | 23.8% | 15 | | 43.6% | 24 | | 23.6% | 64 | |
| They are triaged and then assigned for a more complete assessment prior to beginning counseling | | 12.3% | 10 | | 16.7% | 12 | | 17.5% | 11 | | 27.3% | 15 | | 17.7% | 48 | |
| They are assigned immediately to a counselor who begins the assessment and counseling process | | 74.1% | 60 | | 63.9% | 46 | | 58.7% | 37 | | 29.1% | 16 | | 58.7% | 159 | |
| 52.) Is it your belief that triaging and/or assessing clients prior to assigning them to a counselor leads to an increase in students who choose not to return for counseling? | | | | | | | | | | | | | | | | |
| Yes | | 34.3% | 24 | | 19.1% | 13 | | 29.8% | 17 | | 25.9% | 14 | | 27.3% | 68 | |
| No | | 65.7% | 46 | | 80.9% | 55 | | 70.2% | 40 | | 74.1% | 40 | | 72.7% | 181 | |
| Percentage of Directors who would inform, even without the student's permission, the Vice President or person to whom they report under the following situations. | | | | | | | | | | | | | | | | |
| 53a.) A resident student who is a suicidal risk and also will require hospitalization | | | | | | | | | | | | | | | | |
| | | 74.7% | 59 | | 58% | 40 | | 39.3% | 24 | | 33.3% | 19 | | 53.4% | 142 | |
| 53b.) A student who has some potential for suicide | | | | | | | | | | | | | | | | |
| | | 10% | 8 | | 1.4% | 1 | | 4.9% | 3 | | 3.5% | 2 | | 5.2% | 14 | |
| 53c.) A student whose psychological state is such that he/she might pose a danger to other students | | | | | | | | | | | | | | | | |
| | | 77.8% | 63 | | 69.6% | 48 | | 63.3% | 38 | | 64.9% | 37 | | 69.7% | 186 | |
| 53d.) A student who tells a counselor that he/she has been raped by a resident assistant but doesn't want to make it public | | | | | | | | | | | | | | | | |
| | | 12.7% | 10 | | 15.9% | 11 | | 6.7% | 4 | | 5.4% | 3 | | 10.6% | 28 | |
| 53e.) A student who responds to a counselor that he/she has some kleptomania tendencies and has been stealing from other students in the residence halls | | | | | | | | | | | | | | | | |
| | | 2.5% | 2 | | 5.8% | 4 | | 1.6% | 1 | | 5.3% | 3 | | 3.7% | 10 | |
| 53f.) A resident student who reports to a counselor that he/she is making obscene phone calls to other students in residence | | | | | | | | | | | | | | | | |
| | | 3.8% | 3 | | 7.4% | 5 | | 3.3% | 2 | | 3.6% | 2 | | 4.5% | 12 | |
| 53g.) A student reports to a counselor that his roommate is planing to set of a smoke bomb in a large auditorium and fears it might hurt or panic some people | | | | | | | | | | | | | | | | |
| | | 72.2% | 57 | | 73.9% | 51 | | 66.1% | 39 | | 67.9% | 38 | | 70.3% | 185 | |
| 53h.) A resident student reports that he/she is HIV positive and is sexually active on campus | | | | | | | | | | | | | | | | |
| | | 26% | 20 | | 39.7% | 27 | | 17.2% | 10 | | 17.5% | 10 | | 25.8% | 67 | |

| School Size | | | | | | | | | | | | | | | | |
|--|-------|---------------|----|-------------------------------|---------------|----|--------------------------------|---------------|----|---------------------|---------------|----|----------------|---------------|-----|--|
| Under 2,500 n=87 | | | | Between 2,500 - 7,500 n=79 | | | Between 7,500 - 15,000 n=65 | | | Over 15,000 n=62 | | | Total n=293 | | | |
| | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | |
| 56. Given the anxiety on many campuses about acting out behavior on the part of emotionally disturbed students, how would you handle the following scenarios? | | | | | | | | | | | | | | | | |
| The campus-wide crisis intervention team on your campus or a senior administrator report that there is concern about a student who appears to be emotionally disturbed (perhaps severely depressed or who may be making statements that others find bizarre and scary). | | | | | | | | | | | | | | | | |
| 56a.) Scenario 1: The student had been previously seen at your center and was not amenable to further counseling. Would you: | | | | | | | | | | | | | | | | |
| Inform the committee or administrator of this, saying that the student declined further treatment but was not perceived, at the time, to pose a threat to self or others. | | 5.1% | 4 | | 2.9% | 2 | | 3.3% | 2 | | 15.8% | 9 | | 6.4% | 17 | |
| Say nothing about the previous contact and recommend that the student be referred to the Center and, if the student refuses to take the referral, the school might want to follow whatever mandated counseling guidelines they have established. | | 80.8% | 63 | | 82.4% | 56 | | 91.8% | 56 | | 71.9% | 41 | | 81.8% | 216 | |
| Other | | 14.1% | 11 | | 14.7% | 10 | | 4.9% | 3 | | 12.3% | 7 | | 11.7% | 31 | |
| 56b.) Scenario 2: The student is currently being seen at the center. Would you: | | | | | | | | | | | | | | | | |
| Inform the committee or administrator of this, giving the reassurance (if this is the therapist's judgment) that the student does not appear to be an imminent threat to self or others at this time. | | 6.5% | 5 | | 4.5% | 3 | | 0% | 0 | | 12.3% | 7 | | 5.8% | 15 | |
| Explain to the student (through the treating therapist) of the administrative concern and seek permission to inform the committee or administrator that the student is being seen at the center and is not perceived to be an imminent threat at this time. | | 79.2% | 61 | | 79.1% | 53 | | 79.7% | 47 | | 59.6% | 34 | | 75% | 195 | |
| Other | | 14.3% | 11 | | 16.4% | 11 | | 20.3% | 12 | | 28.1% | 16 | | 19.2% | 50 | |
| 56c.) Scenario 3: The student has not been seen at the Center. Would you: | | | | | | | | | | | | | | | | |
| Recommend that the student be referred to the center for assessment and counseling with no follow-up if student does not comply. | | 9% | 7 | | 22.4% | 15 | | 13.1% | 8 | | 23.6% | 13 | | 16.5% | 43 | |
| Same as above, but if student does not follow through on referral, the counseling center will contact the student and encouraging counseling. | | 25.6% | 20 | | 28.4% | 19 | | 26.2% | 16 | | 29.1% | 16 | | 27.2% | 71 | |
| If student is resistant to seeking therapy, and concern remains significant, recommended that the school's mandated counseling policy be initiated. | | 47.4% | 37 | | 35.8% | 24 | | 41% | 25 | | 32.7% | 18 | | 39.8% | 104 | |
| Other | | 17.9% | 14 | | 13.4% | 9 | | 19.7% | 12 | | 14.5% | 8 | | 16.5% | 43 | |
| 56d.) Scenario 4: The student accepts referral to the center, but after several sessions, declines further treatment, and is not viewed as being a danger to self or others at that time. Nevertheless, the student continues to be worrisome to others, and your advice is sought. Would you: | | | | | | | | | | | | | | | | |
| State that you cannot comment on the student's counseling outcomes and that these concerns will have to be addressed by the administration. | | 50% | 38 | | 55.4% | 36 | | 55.2% | 32 | | 39.3% | 22 | | 50.2% | 128 | |
| Inform the crisis committee or the administrator that the student is not open to further counseling, and if the concern is perceived as significant, that other administrative options need to be considered such as mandated counseling, or the involvement of parents. | | 18.4% | 14 | | 26.2% | 17 | | 29.3% | 17 | | 26.8% | 15 | | 24.7% | 63 | |
| Other | | 31.6% | 24 | | 18.5% | 12 | | 15.5% | 9 | | 33.9% | 19 | | 25.1% | 64 | |
| 57. List directors salary for the appropriate staff size and experience level category. Staff size should be based only on salaried individuals (i.e., do not include non-paid student help). | | | | | | | | | | | | | | | | |
| 57a.) 1 FTE | | | | | | | | | | | | | | | | |
| Under 5 Years as Director | 53.9K | 39K – 86K | | 56.9K | 39K – 72K | | 53.8K | 40K – 75K | | | | | 54.9K | 39K – 86K | | |
| 5-10 Years as Director | 55.1K | 15K – 100K | | 63K | 54K – 72K | | 73.7K | 50K – 101K | | 93K | 93K | | 60.3K | 15K – 101K | | |
| Over 10 Years as Director | 65.4K | 39K – 100K | | 71K | 50K – 94K | | 80K | 60K – 100K | | 92.5K | 92K – 93K | | 70.5K | 39K – 100K | | |
| 57b.) 2-3 FTE | | | | | | | | | | | | | | | | |
| Under 5 Years as Director | 68.1K | 50K – 95K | | 72.8K | 40K – 140K | | 57K | 45K – 67K | | | | | 68.8K | 40K – 140K | | |
| 5-10 Years as Director | 62.6K | 47K – 85K | | 66.5K | 39K – 81K | | 78.2K | 56K – 115K | | | | | 67.8K | 39K – 115K | | |
| Over 10 Years as Director | 76K | 51K – 100K | | 70.1K | 59K – 90K | | 39K | 13K – 65K | | | | | 72.3K | 13K – 100K | | |
| 57c.) 4-7 FTE | | | | | | | | | | | | | | | | |
| Under 5 Years as Director | 68.5K | 60K – 77K | | 68.1K | 38K – 81K | | 80K | 55K – 95K | | 86.5K | 81K – 92K | | 74.5K | 38K – 95K | | |
| 5-10 Years as Director | 85.2K | 65K – 115K | | 80.8K | 11K – 156K | | 59.5K | 6K – 89K | | 69K | 63K – 75K | | 76.2K | 6K – 156K | | |
| Over 10 Years as Director | 73.2K | 13K – 100K | | 90.9K | 65K – 105K | | 87.5K | 70K – 105K | | 67.4K | 40K – 88K | | 83.4K | 13K – 105K | | |
| 57d.) 8-11 FTE | | | | | | | | | | | | | | | | |
| Under 5 Years as Director | 86.5K | 63K – 110K | | 56.5K | 38K – 75K | | 83.8K | 65K – 95K | | 106K | 90K – 117K | | 88.5K | 38K – 117K | | |
| 5-10 Years as Director | 88K | 67K – 109K | | 78.7K | 69K – 89K | | 81.6K | 11K – 110K | | 88.8K | 12K – 115K | | 84.6K | 11K – 115K | | |
| Over 10 Years as Director | 98.3K | 72K – 115K | | 96K | 86K – 109K | | 88.2K | 75K – 106K | | 120.2K | 90K – 145K | | 99.5K | 72K – 145K | | |

| School Size | | | | | | | | | | | | | | | | |
|---------------------------|---------------------|---------------|---|-------------------------------|---------------|---|--------------------------------|---------------|---|---------------------|---------------|---|----------------|---------------|---|--|
| | Under 2,500 n=87 | | | Between 2,500 - 7,500 n=79 | | | Between 7,500 - 15,000 n=65 | | | Over 15,000 n=62 | | | Total n=293 | | | |
| | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | mean | range or % | # | |
| 57e.) 12-16 FTE | | | | | | | | | | | | | | | | |
| Under 5 Years as Director | 92.5K | 70K – 115K | | 78K | 78K | | 78K | 70K – 86K | | 77.4K | 8K – 92K | | 80.1K | 8K – 115K | | |
| 5-10 Years as Director | 97.5K | 75K – 120K | | 85K | 85K | | 75K | 75K | | 104.3K | 85K – 121K | | 98.1K | 75K – 121K | | |
| Over 10 Years as Director | 101K | 80K – 122K | | 92K | 92K | | 122K | 80K – 164K | | 107.5K | 105K – 110K | | 107.6K | 80K – 164K | | |
| 57f.) 17+ FTE | | | | | | | | | | | | | | | | |
| Under 5 Years as Director | 117.5K | 85K – 150K | | 90K | 90K | | 108.5K | 70K – 147K | | 86K | 86K | | 104.7K | 70K – 150K | | |
| 5-10 Years as Director | 125K | 90K – 160K | | 93K | 93K | | 138.3K | 75K – 230K | | 125.5K | 112K – 139K | | 126.1K | 75K – 230K | | |
| Over 10 Years as Director | 72.3K | 17K – 105K | | 98K | 98K | | 125K | 80K – 170K | | 115.7K | 76K – 146K | | 104.9K | 17K – 170K | | |

58.) Responding Director's rated the following services on how essential they believed them to be, and they also rated how they believe their VP (or person to whom they report) would rate them.

Presented below are the percentages of how essential the following services are as viewed by the director's themselves and also by how director's believe their Vice President (or person to whom they report) would rate them. The ratings ranged from 5= Highly Essential to 1= Not at all Essential . The percentages presented here reflect the combined percentage of both Director's and VP's who rated the services as Very Essential, and Highly Essential.

| | Under 2,500 | | Between 2,500 - 7,500 | | Between 7,500 - 15,000 | | Over 15,000 | | Total | |
|--|-----------------|-----------------------|-----------------------|-----------------------|------------------------|-----------------------|-----------------|-----------------------|-----------------|-----------------------|
| | Director Rating | VP's Perceived Rating | Director Rating | VP's Perceived Rating | Director Rating | VP's Perceived Rating | Director Rating | VP's Perceived Rating | Director Rating | VP's Perceived Rating |
| Extensive psychotherapy (6 months or longer) for all students who might benefit | 33.3% | 17.5% | 25.0% | 15.6% | 31.2% | 23.8% | 17.6% | 12.5% | 27.4% | 17.4% |
| Group therapy | 14.0% | 11.1% | 36.8% | 31.7% | 55.7% | 39.7% | 77.2% | 49.2% | 43.0% | 31.0% |
| Brief counseling (up to 12 sessions) with whatever problems students bring to the Center | 83.8% | 73.8% | 92.6% | 89.0% | 86.9% | 86.4% | 94.7% | 91.1% | 89.1% | 84.2% |
| Crisis intervention (responding to serious student crises such as suicide attempts and psychotic breakdowns) | 97.6% | 97.5% | 98.5% | 98.4% | 100.0% | 100.0% | 100.0% | 100.0% | 98.9% | 98.8% |
| The training of resident hall staff or others on campus who work with students | 90.0% | 91.2% | 94.1% | 80.9% | 88.5% | 81.3% | 91.2% | 82.5% | 91.0% | 84.5% |
| Treatment of whatever length is necessary for students who have been sexually assaulted on campus | 70.0% | 56.3% | 68.7% | 62.5% | 63.9% | 50.8% | 59.6% | 57.9% | 66.0% | 56.9% |
| Specialized sexual assault counseling program (apart from traditional counseling program) | 23.4% | 27.9% | 30.9% | 25.0% | 39.3% | 30.5% | 38.6% | 39.2% | 32.2% | 30.2% |
| Campus research (e.g., surveys that help to educate the campus community about student characteristics or needs) | 35.8% | 35.0% | 31.4% | 34.9% | 37.8% | 43.1% | 37.5% | 36.3% | 35.4% | 37.1% |
| Research for publication | 2.4% | 10.0% | 1.5% | 7.8% | 11.4% | 12.0% | 12.3% | 10.7% | 6.4% | 10.0% |
| Learning skills or study skills program | 30.9% | 30.4% | 27.9% | 21.8% | 41.0% | 32.8% | 31.6% | 26.8% | 32.6% | 28.0% |
| Psychiatrists providing psychotherapy (in addition to doing psychiatric assessment and prescribing medication) | 13.7% | 10.3% | 8.9% | 6.4% | 21.7% | 22.4% | 14.0% | 18.2% | 14.4% | 13.8% |
| Psychiatric assessment and prescriptions | 53.1% | 47.6% | 67.6% | 54.7% | 75.4% | 62.7% | 96.4% | 98.1% | 71.1% | 63.5% |
| The acceptance of mandated referrals by the Counseling center from judicial boards and administrators | 30.0% | 55.0% | 24.2% | 60.9% | 40.7% | 64.3% | 26.8% | 55.4% | 30.3% | 58.6% |
| Structured groups on assertiveness, social skills, etc. | 16.3% | 16.3% | 16.2% | 25.0% | 30.0% | 23.8% | 57.9% | 42.8% | 28.3% | 25.9% |
| Consultation with faculty, staff, and administrators | 90.0% | 82.2% | 94.1% | 92.0% | 90.2% | 89.8% | 96.5% | 100.0% | 92.5% | 90.3% |
| Serving as campus mediators | 18.8% | 19.2% | 11.8% | 17.8% | 20.4% | 26.3% | 8.9% | 17.9% | 15.2% | 20.1% |
| Serving on crisis intervention teams with other campus professionals | 87.4% | 82.4% | 86.7% | 89.1% | 96.7% | 93.2% | 98.2% | 94.7% | 91.7% | 89.2% |

Alphabetical Listing of Directors

| | | |
|-------------------------------|---------------------------|--------------------------------------|
| 272 - Achter, John | 288 - Bringaze, Tammy | 258 - Crawford, Deena |
| 132 - Alishio, Kip | 280 - Brounk, Tom | 162 - Culotta, Cheryl |
| 229 - Altayli, Benek | 55 - Brown, Steve | 12 - Danchise, Roger |
| 5 - Anderson, Laura | 131 - Bruce-Sanford, Gail | 97 - Davis, Sandy |
| 259 - Aquino, Carlos | 68 - Brunner, Jon | 73 - Deakin, Spencer |
| 30 - Arce, Elsa | 61 - Bucell, Michael | 153 - Dellutri, Alexandra |
| 171 - Assing, Wayne | 231 - Buck, Sylvia | 290 - DeMerchant, Doug |
| 112 - Atkins, Paula | 74 - Buhrow, Bill | 219 - Deschenes, Paul |
| 175 - Azar, Jim | 159 - Burks, Suzanne | 130 - Disney, Debra |
| 136 - Backels, Kelsey | 151 - Burns, Bill | 16 - Duarte, Melanie |
| 50 - Balaban, Mark | 193 - Bzdell, Wally | 155 - Dunkle, John |
| 240 - Baribeau-Thoennes, Jean | 221 - Cahill, Brigid | 167 - Dunn-Steinke, Molly |
| 242 - Barkis, Marita | 77 - Caldwell, Jodi | 52 - Dwyer, Matt |
| 150 - Barnette, Vivian | 263 - Cannici, James | 124 - Edwards, Jon |
| 262 - Barr, Victor | 268 - Carter, Leonard | 115 - Ellis, Diane |
| 99 - Barresi, Jr., Joseph | 187 - Castillo, Elisa | 273 - Evashevski, Keith |
| 192 - Bassi-Cook, Teresa | 8 - Castronovo, Neil | 244 - Everhart, Deborah |
| 34 - Bauer, Jim | 196 - Chang, Victor | 36 - Ewing, Michael |
| 230 - Beale, Charles | 93 - Chew, Kenneth | 210 - Faith, Michele |
| 203 - Becker, Ronald | 239 - Clement, Jane | 103 - Farer-Singleton, Ph.D., Pamela |
| 23 - Berkow, Dan | 233 - Cochran, Sam | 269 - Federman, Russ |
| 206 - Billard, Trisha | 91 - Colbs, Sandy | 86 - Feisthamel, Kevin |
| 223 - Binder, Marian | 3 - Collins, Wanda | 118 - Ferleger, Naomi |
| 106 - Birky, Ian | 56 - Comer, Pam | 213 - Finkelstein, Ferry |
| 264 - Blankenship, Lise | 11 - Commerford, Mary | 148 - Fisher, Anne |
| 65 - Bloom, Linda | 21 - Compliment, Brad | 141 - Fleck, Patti J. |
| 154 - Boone, Rebecca | 158 - Cook, Colleen | 119 - Foldeak, Max |
| 37 - Booth, Ann | 282 - Cook-Nobles, Robin | 25 - Franklin, Mike |
| 172 - Bottone, Fran | 275 - Cooper, Stewart | 85 - Freeman-Smith, Faye |
| 84 - Bowman, Kevin | 287 - Corbin, Nancy | 143 - Friedman-Lombardo, Jaclyn |
| 144 - Brasel, Stephen | 2 - Cornish, Peter | 238 - Frizzell, Christine |
| 266 - Brian, Tom J | 217 - Cosimano, Anne | 40 - Gainor, Birmagidra |
| | 88 - Coughlin, Jay | |

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| 149 - Gallagher-Hobson, Abisola | 292 - Howlett, Beth | 20 - Magnus, Keith |
| 75 - Ganske, Katie | 62 - Huff, Jacqueline | 108 - Manassah, Michele |
| 211 - Gartner, Maggie | 127 - Hurley, George | 142 - Mancini, Franca |
| 286 - Gersh, Geniene | 197 - Irvin, ValaRay | 38 - Mann, Warrenetta |
| 215 - Gerstacker, Matthew | 43 - Jabs, Carol | 138 - March, Cindy |
| 249 - Gilroy, Paula | 166 - Jackson, Kenneth | 243 - Marczynski, Cindy |
| 170 - Givens, Chaney | 139 - Jensen, Leigh | 46 - Markson, Alison |
| 125 - Glore, Susan | 19 - Johnson, Belinda | 174 - Marsden, Sarah |
| 116 - Glover, Jo | 277 - Jones, Sarah | 220 - Martin, Juanita |
| 27 - Goede, Lance | 24 - Jordan, Christy | 181 - Mason, Mary Jo |
| 265 - Gordon Stair, Angela | 189 - Jorgensen-Funk, Sandy | 185 - Mathews, Ruth |
| 121 - Grayson, Paul | 232 - Kahn, Al | 82 - McGowan, Jeanne |
| 168 - Green, Judith | 147 - Kapadia, Malika | 15 - McGuinness, Thomas |
| 140 - Greiner, Doug | 83 - Kazin, Bob | 107 - McKinnies, Magi |
| 208 - Grimshaw-Clark, Maria | 105 - Kearney, Anne | 165 - McLean, Anita |
| 274 - Grotgen, John | 110 - Kerrigan, John | 129 - Meier, Beth |
| 178 - Guerra, Olga | 94 - Kincade, Elizabeth | 134 - Mejia, Ximena |
| 92 - Hagenbaugh, James | 164 - King, Baron | 137 - Meloy, Joe |
| 218 - Hamilton, Joe | 227 - Kramer, Thomas | 135 - Midgett, Pam |
| 204 - Hammock, Cheryl | 48 - Krisak, Wendy | 49 - Molyneux, Annette |
| 117 - Hannigan, Terence P. | 53 - Kuchem, Jenny | 98 - Mond, Michael |
| 95 - Harper, Deborah | 102 - Lambert, Dorinda | 248 - Monteagudo, Rene |
| 13 - Harrar, William | 47 - Lanfear, Jeffrey | 28 - Moran-Brown, Carol |
| 22 - Haskell, Caroline | 87 - Lastoria, Michael | 293 - Morse, Charles |
| 163 - Heitzmann, Dennis | 57 - Lauterbach, Lisa | 283 - Mulligan, Maura |
| 59 - Hemlick, Lisa | 72 - Lawson, Rebecca | 64 - Nelson, Bruce |
| 169 - Hershbell, Anne | 216 - Lee, Randolph | 235 - Ness, David |
| 201 - Herzbrun, Michael | 7 - Lele, Darshana | 32 - Newmen, Patricia |
| 6 - Hestand, Phil | 254 - LeViness, Peter | 184 - Nicholls, Greg |
| 198 - Hill, Curtis | 109 - Licht, Jodi | 126 - Nifakis, Debbie |
| 281 - Hill, Lynn | 113 - Linden, Kristin | 214 - Nobleza, Deanna |
| 234 - Hopkins, Nathaniel | 245 - Linneman, Harry | 190 - Nunziato, Dina |
| 146 - Hopkins, Nina | 156 - Lipiec, Sue | 70 - Olliff, Kenton |
| 279 - Horton, Jane | 186 - LoCicero, Jack | 194 - Olson, Ellie |
| 289 - Howard, Kasi | 45 - Lovstuen, Brenda | 202 - O'Neill, Steve |
| | 39 - MacQuiddy, Susan | 96 - Onestak, David |

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| 67 - Pammer, Andrea | 161 - Schein, Sandra | 250 - Towle, David |
| 42 - Peake, Jaklin | 35 - Schwaiger Willig, Patricia | 90 - Tzou, Jean |
| 246 - Pere, Adrian | 276 - Scott-Ward, Gillian | 177 - Ventrelle, David |
| 76 - Perez, Ruperto | 180 - Serra, Neuza | 183 - Wagner, Laura |
| 284 - Perone, Julie | 278 - Shuster, Art | 29 - Walker, Jeanne |
| 199 - Peterson, Michael | 123 - Siegel, Alan | 241 - Wallace, David |
| 160 - Pittman, James | 31 - Smith, Christine | 54 - Waller, Beatrice |
| 188 - Platt, Susan | 261 - Smith, Ed | 111 - Walls-McKay, Maureen |
| 226 - Polychronis, Paul | 128 - Smith, Judy | 224 - Waters, Myra |
| 101 - Ponto, Patricia | 17 - Smith, Steve | 173 - Weas, John |
| 4 - Pool, Cleave | 256 - Smith, Thomas | 157 - Weiner, Alfred |
| 69 - Pritchett, Nikki | 212 - Snodgrass, Gregory | 122 - Weisner, Silvestro |
| 228 - Raforth, Karen | 78 - Solbach, Robin | 267 - Weitzman, Lauren |
| 209 - Ramirez, David | 247 - Spano, David | 71 - Welch, Paul |
| 26 - Rapaport, Ross | 79 - Speed, Coleen | 14 - West, Karla |
| 271 - Reilly-Myklebust, Alice | 44 - Spoltore, Janet | 237 - Wick, Patricia |
| 205 - Reymann, Linda | 251 - Steibe-Pasalich, Susan | 145 - Wilburn, Brenda |
| 253 - Rhinehart, Leslie | 176 - Stock, Susan | 100 - Williams, Beth |
| 104 - Ribnik, Emily | 18 - Stoddard, Reed | 66 - Williamson, Sean |
| 81 - Rinehart, Lisa | 60 - Strader, Scott | 182 - Wilson, David |
| 285 - Ritchie, John | 236 - Surething, Nicole | 270 - Wilson, Lynn |
| 80 - Roberts, Amber | 63 - Swarr, Amy | 9 - Wulff, Susan |
| 260 - Rockett, Geraldine | 89 - Tennill, Willaim | 10 - Wyatt, Joy |
| 225 - Rodolfa, Emil | 179 - Terebessy, Hilarie | 195 - Wyatt, Lisa |
| 222 - Rousmaniere, Tony | 255 - Thomas, Barbara | 41 - Yatsko, Cheryl |
| 1 - Rowlands, Steve | 291 - Thompson, Eileen | 120 - Zebrowski, Mike |
| 191 - Roy, Nance | 33 - Thompson, Mark | 252 - Zukor, Tevya |
| 200 - Ruthrauff, Terry | 58 - Thorne, Brad | |
| 257 - Sahgal, Anita | 133 - Tipps, Jane | |
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| <p>3 American University Counseling Center 4400 Mass Ave., NW, MGC 214 Wanda Collins Washington, DC 20016-8150 PHONE: 202-885-3500 FAX: 202-885-1397 wcollin@american.edu</p> | <p>8 Assumption College 500 Salisbury St. Neil Castronovo Worcester, MA 01602 PHONE: 508-767-7274 FAX: 508-753-7039 ncastron@assumption.edu</p> |
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| <p>5 Anna Maria College 50 Sunset Lane Laura Anderson Paxton, MA 01612 PHONE: 508-849-3308 FAX: 508-849-3471 landerson@annamaria.edu</p> | <p>10 Baldwin-Wallace College 275 Eastland Rd. Joy Wyatt Berea, OH 44017 PHONE: 440-826-2034 FAX: 440-826-3382 jdwyatt@bw.edu</p> |
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| 13 | <p>Bloomsburg University 240 Warren SSC 400 East 2nd St William Harrar Bloomsburg, PA 17815 PHONE: 570-389-4255 wharrar@bloomu.edu</p> | 19 | <p>Brown University Psychological Services Box 1960 Belinda Johnson Providence, RI 02912 PHONE: 401-863-3476 FAX: 401-863-3657 Belinda_Johnson@brown.edu</p> |
| 14 | <p>Boise State University 1910 University Drive Karla West Boise, ID 83725 PHONE: kwest@boisestate.edu</p> | 20 | <p>Butler University 530 W. 49th St. Keith Magnus Indianapolis, IN 46208 PHONE: 317-940-9385 FAX: 317-940-6403 kmagnus@butler.edu</p> |
| 15 | <p>Boston College Counseling Services Thomas McGuinness Chestnut Hill, MA 02467 PHONE: 617-552-2317 FAX: 617-552-2562 mcguines@bc.edu</p> | 21 | <p>California State University - Long Beach 1250 Bellflower Blvd - MS 0111 CAPS Brad Compliment Long Beach, CA 90840-0111 PHONE: 562-985-4001 FAX: 562-985-8817 brad.compliment@csulb.edu</p> |
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| <p>27 Central Wyoming College 2660 Peck Ave. Lance Goede Riverton, WY 82501 PHONE: 307-855-2175 FAX: 307-855-2065 lgoede@cwcc.edu</p> | <p>33 Colgate University Counseling & Psychological Services 13 Oak Dr. Mark Thompson Hamilton, NY 13346 PHONE: 315-228-7385 FAX: 315-228-7053 mdthompson@colgate.edu</p> |
| <p>28 Champlain College 163 South Willard Street PO Box 670 Carol Moran-Brown Burlington, VT 05402 PHONE: 802-865-6426 FAX: 802-860-2764 Moran@champlain.edu</p> | <p>34 College For Creative Studies 201 E. Kirby Jim Bauer Detroit, MI 48202 PHONE: 313-664-7412 FAX: 313-664-7686 jbauer@collegeforcreativestudies.edu</p> |
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